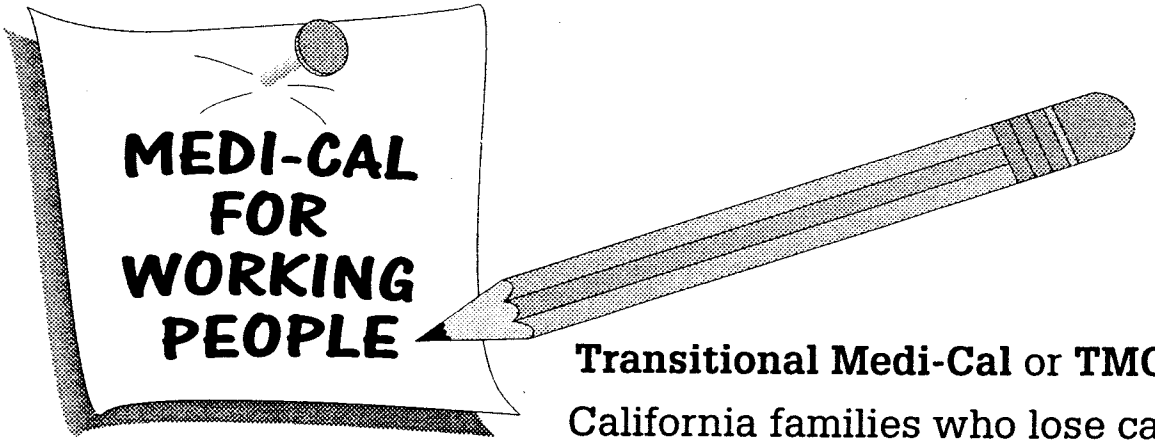



**Transitional Medi-Cal** or **TMC** is for California families who lose cash aid and Medi-Cal (or who would have been eligible for cash under old rules) but are no longer eligible because of higher earnings from work. If you are the principal earner or caretaker and get a job or your job pays you more money, you may get no-cost Medi-Cal for up to 12 months.

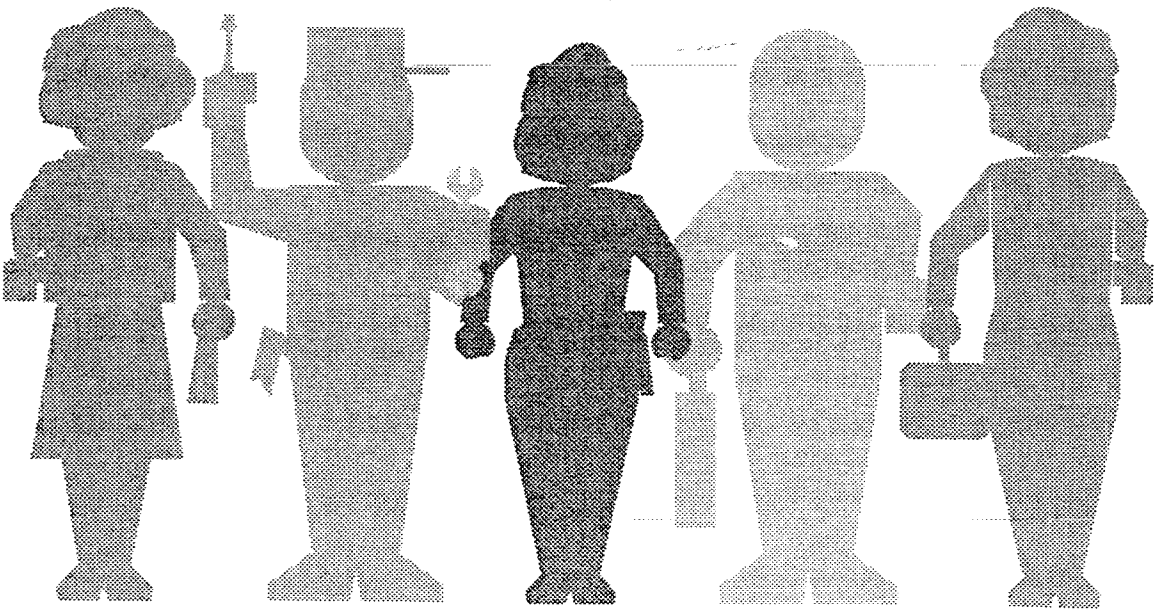
To get the first 6 months of **TMC**, you must:

- ☑ have a child in the home.

To get the second 6 months of **TMC**, you must also:

- ☑ continue to work, and
- ☑ earn under a certain amount.

Be sure to let your worker know if you get a job or have more earnings from your job. You can do this by filling out and returning the form on the back of this flyer to your county welfare department.



# TRANSITIONAL MEDI-CAL

## Did you go off Medi-Cal or cash aid because you got a job?

' you got money from a job, please answer the questions below and attach pay stubs or other proof of earnings. Please include ps or income in-kind, such as earned housing. If self employed, list business costs on a separate sheet of paper and attach roof of income and costs. Please return this form to:

*'lease type or print clearly.*

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| ame | TOTAL HOURS WORKED IN REPORT MONTH: | DATE PAID: | MM DD YY | MM DD YY | MM DD YY | MM DD YY | MM DD YY |
| mployer/source | | GROSS AMOUNT: | $ | $ | $ | $ | $ |
| ame | TOTAL HOURS WORKED IN REPORT MONTH: | DATE PAID: | MM DD YY | MM DD YY | MM DD YY | MM DD YY | MM DD YY |
| mployer/source | | GROSS AMOUNT: | $ | $ | $ | $ | $ |
| ame | TOTAL HOURS WORKED IN REPORT MONTH: | DATE PAID: | MM DD YY | MM DD YY | MM DD YY | MM DD YY | MM DD YY |
| mployer/source | | GROSS AMOUNT: | $ | $ | $ | $ | $ |

id your family have any other changes, such as someone moved in or out of the house or was married, divorced, or became regnant? ❒ Yes ❒ No If yes, please explain:

you can't read this notice, ask your worker for a translation.

*panish:* Si no puede leer esta notificación, pídale a su trabajador que se la traduzca.

*'ambodian:* ប្រសិនបើលោកអ្នកមិនយល់សេចក្តីប្រកាសនេះទេ សូមសាកសួររកសេចក្តីបកប្រែពីអ្នកកាន់សំណុំរឿងរបស់លោកអ្នក ។

*'hinese:* 假如你看不懂這份通知，可以要求你的工作員幫助你翻譯。

*'ussian:* Если Вы не можете прочитать и (или) понять это извещение, попросите Вашего работника перевести.

*'ietnamese:* Nếu quý vị không biết tiếng Anh để hiểu nội dung thông báo này, hãy xin nhân viên phụ trách tìm người dịch giúp cho quý vị.

**declare under penalty of perjury that all information provided is true and correct.**

| | | | |
|---|---|---|---|
| gnature ► | Date | Telephone number ( ) | Social Security number |
| ddress (number, street) | | City | ZIP code |
| gnature of witness, interpreter, or person assisting ► | | Date | Telephone number ( ) |